

U.S. Postal Service

CERTIFIED MAIL RECEIPT

0009

(Domestic Mail Only; No Insurance Coverage Provided)

JB DOGM S/049/044 & S/049/045 11/12/04

Postage

\$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$

Postmark
Here

Recipient's Name (Please Print Clearly) (to be completed by mailer)

PAMELA KAYE - ATLANTIC RICHFIELD CO

Street, Apt. No.; or PO Box No.

317 ANACONDA RD

City, State, ZIP+4

BUTTE MT 59701

0009

7099 3400 0016 8896 0457

Certified Mail Provides:

- A mailing receipt
- A unique identifier for your mailpiece
- A signature upon delivery
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may **ONLY** be combined with First-Class Mail or Priority Mail.
- Certified Mail is *not* available for any class of international mail.
- **NO INSURANCE COVERAGE IS PROVIDED** with Certified Mail. For valuables, please consider Insured or Registered Mail.
- For an additional fee, a *Return Receipt* may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
- For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "*Restricted Delivery*".
- If a postmark on the Certified Mail receipt is desired, please present the article at the post office for postmarking. If a postmark on the Certified Mail receipt is not needed, detach and affix label with postage and mail.

IMPORTANT: Save this receipt and present it when making an inquiry.

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

PAMELA KAYE
ATLANTIC RICHFIELD CO
317 ANACONDA RD
BUTTE MT 59701

JB DOGM S/049/044 & S/049/045
11/12/04

2. Article Number

(Transfer from service label)

7099 3400 0016 8896 0457

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Merry Litman* ☐ Agent
☒ Addressee

B. Received by (Printed Name)

ARCO

C. Date of Delivery

11-15-04

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☒ No

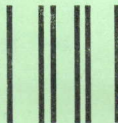
3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

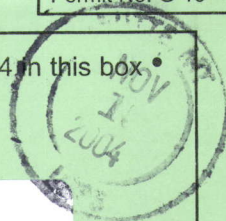
UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

Joelle Burns
State of Utah
Division of Oil, Gas and Mining
1594 West North Temple Suite 1210
Salt Lake City UT 84114-5801



RECEIVED
NOV 23 2004

DIVISION OF OIL, GAS & MINING